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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself			
			About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	your pictu exar licer	e the name that is on government-issued ire identification (for nple, your driver's ise or passport).	Crystal First name R Middle name		First name Middle name
	iden	tification to your ting with the trustee.	Rogers Last name and Suffix (Sr., Jr., II, III)	Ī	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years			
		ide your married or den names.			
3.	you num Indi	the last 4 digits of r Social Security sber or federal vidual Taxpayer tification number	xxx-xx-5889		

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Debtor 1 Crystal R Rogers

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	463 E 463-4 64	If Debtor 2 lives at a different address:
		462 E 163rd St. South Holland, IL 60473 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Crystal R Rogers

Par	Tell the Court About Y	our Ba	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7							
		☐ Ch	napter 11						
		☐ Cr	napter 12						
		■ Ch	napter 13						
8.	How you will pay the fee		I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
			I need to pay	the fee in installments.		e this option, sigr	n and attach the Applica	ation for Individuals to Pay	
			Ū	e in Installments (Official F	,	Alaia andian andi.i	if was and filling for Obar	eter 7. Dulawa sindan man	
			but is not requapplies to you	iired to, waive your fee, a	nd may do so unable to pay	only if your inco the fee in instal	ome is less than 150% of lments). If you choose	oter 7. By law, a judge may, of the official poverty line that this option, you must fill out your petition.	
9.	Have you filed for bankruptcy within the	□ No							
	last 8 years?	■ Ye	S.						
			District	ND IL	When	7/16/16	Case number	16-21754	
			District	ND IL	When	7/28/12	Case number	12-29889	
			District	See Attachment	When		Case number		
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	s.						
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
11.	Do you rent your	■ No	Go to lii	ne 12.					
	residence?	☐ Ye	s. Has you	ur landlord obtained an ev	viction judgme	ent against you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statem</i> bankruptcy petition.	nent About an	Eviction Judgm	ent Against You (Form	101A) and file it with this	

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Document Page 4 of 70 Case number (if known) Debtor 1 Crystal R Rogers Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or

livestock that must be fed, or a building that needs urgent repairs? Case 18-01276 Doc 1 Filed 01/16/18 Entered 01/16/18 20:35:30 Desc Main Document Page 5 of 70

Debtor 1 Crystal R Rogers

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do vou □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you ■ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Crystal R Rogers Signature of Debtor 2 Crystal R Rogers Signature of Debtor 1 Executed on Executed on **January 16, 2018** MM / DD / YYYY MM / DD / YYYY

Debtor 1

Crystal R Rogers

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Debtor 1 Crystal R Rogers

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christin	ne Thurston	Date	January 16, 2018
Signature of	Attorney for Debtor		MM / DD / YYYY
Christine 1	「hurston		
Printed name			
Thurston L	₋aw Firm		
Firm name			
208 S. LaS	alle		
Suite 1410			
Chicago, II	L 60604		
	City, State & ZIP Code		
Contact phone	312-818-8008	Email address	cthurston@thurstonlawfirm.com
6297774			
Par number 9 Ct	oto		

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Debtor 1 Crystal R Rogers

(if known)

Debtor 1

Crystal R Rogers
First Name

Middle Name

Last Name

Debtor 2
(Spouse if, filing)

First Name

Middle Name

Last Name

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number

☐ Check if this is an amended filing

Case number (if known)

FORM 101. VOLUNTARY PETITION

Prior Bankruptcy Cases Filed Attachment

District	Case Number	Date Filed
ND IL	16-21754	7/16/16
ND IL	12-29889	7/28/12
ND IL	11-44489	10/31/11
ND IL	11-05167	2/11/11

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	Documer	nt Page 9 of 70
mation to identify your	case:	
Crystal R Rogers		
First Name	Middle Name	Last Name
First Name	Middle Name	Last Name
ankruptcy Court for the:	NORTHERN DISTRICT O	FILLINOIS
	Crystal R Rogers First Name	First Name Middle Name

☐ Check if this is an amended filing

Official Form 106Sum

Case number (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	ssets of what you own
		value	or what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,235.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	11,235.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	20,374.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	5,710.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	91,575.00
	Your total liabilities	\$	117,659.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,631.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,081.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes What kind of debt do you have?		

the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

5,199.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	5,710.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	64,024.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	69,734.00

Case 18-01276 Doc 1 Filed 01/16/18 Entered 01/16/18 20:35:30 Desc Main Document Page 11 of 70 Fill in this information to identify your case and this filing: Debtor 1 Crystal R Rogers Middle Name Last Name First Name Debtor 2 Middle Name (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Malibu Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2011 Debtor 2 only Current value of the Current value of the 105k Approximate mileage: entire property? Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another \$7,575.00 \$7,575.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$7,575.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

Case 18-01276 Filed 01/16/18 Entered 01/16/18 20:35:30 Document Page 12 of 70 Debtor 1 Case number (if known) Crystal R Rogers Yes. Describe..... \$500.00 Various used furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$500.00 Various used electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No ■ Yes. Describe..... \$50.00 Exercise equipment 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$500.00 Various used clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,550.00 for Part 3. Write that number here

Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Doc 1

Current value of the portion you own? Do not deduct secured

Desc Main

page 2 Official Form 106A/B Schedule A/B: Property

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Case number (if known) Debtor 1 Crystal R Rogers claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **US Bank** \$5.00 17.1. **Chase Checking and Savings** \$5.00 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: 403B \$2,000.00 **IRA** \$100.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

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De	ebtor 1	Crystal R Rogers	5	Document	Case number (if known)				
25.	25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit								
	☐ Yes.	Give specific informat	tion about them						
26.	 Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No 								
		Give specific informat	tion about them						
27.		es, franchises, and o les: Building permits,			n holdings, liquor licenses, professional license	es			
	☐ Yes.	Give specific informat	tion about them						
Me	oney or p	property owed to you	ı?			Current value of the portion you own? Do not deduct secured claims or exemptions.			
28.	_	unds owed to you							
	■ No □ Yes.	Give specific informati	ion about them, inc	cluding whether you alrea	ady filed the returns and the tax years				
29.	Family Examp		sum alimony, spo	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement			
	■ No □ Yes.	Give specific informati	on						
30.					efits, sick pay, vacation pay, workers' compen	sation, Social Security			
	■ No □ Yes.	Give specific informat	tion						
31.	Examp	ts in insurance polic les: Health, disability,		nealth savings account (F	HSA); credit, homeowner's, or renter's insuran	се			
	■ No □ Yes I	Name the insurance c	ompany of each p	olicy and list its value.					
			Company name:	oney and not he value.	Beneficiary:	Surrender or refund value:			
32.	32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No								
	☐ Yes.	Give specific informat	tion						
33.				you have filed a lawsui surance claims, or rights	t or made a demand for payment to sue				
		Describe each claim							
34.	Other o	ontingent and unlique	uidated claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims			
	☐ Yes.	Describe each claim							
35.	Any fin ■ No	ancial assets you di	d not already list						
		Give specific informat	tion						

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Dep	tor 1 Crystal R Rogers		Case number (if known)	
36.	Add the dollar value of all of your entries from Part 4, includir for Part 4. Write that number here			\$2,110.00
Part	5: Describe Any Business-Related Property You Own or Have an Inte	rest In I jet anv real est	ate in Part 1	
ıaıı	bescribe Any Business-Kelateu i Toperty Tou Own of Trave all line	rest III. List ally real est	ate iii i ait i.	
	o you own or have any legal or equitable interest in any business-relat	ted property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Intere	st In.	
46. I	Do you own or have any legal or equitable interest in any farm-	- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information	•		
54.	Add the dollar value of all of your entries from Part 7. Write the	nat number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$7,575.00		
57.	Part 3: Total personal and household items, line 15	\$1,550.00		
58.	Part 4: Total financial assets, line 36	\$2,110.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$11,235.00	Copy personal property total	\$11,235.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$11,235.00

Official Form 106A/B Schedule A/B: Property page 5

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Page 16 of 70 Document Fill in this information to identify your case: Debtor 1 **Crystal R Rogers** Middle Name Last Name First Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

amended filing

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property Yo	u Claim as	Exempt
---------	--------------	-------------	------------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property			opositio lawe that allow exemption	
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
Various used furniture Line from Schedule A/B: 6.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A.B. V. I			100% of fair market value, up to any applicable statutory limit	
Various used electronics Line from Schedule A/B: 7.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line Horr Schedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit	
Exercise equipment Line from Schedule A/B: 9.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
Line from Schedule A/D. 3.1			100% of fair market value, up to any applicable statutory limit	
Various used clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit	
US Bank Line from Schedule A/B: 17.1	\$5.00		\$5.00	735 ILCS 5/12-1001(b)
Line IIOIII Scriedule A/B: 17.1			100% of fair market value, up to	

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Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$5.00	•	\$5.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$2,000.00		\$2,000.00	735 ILCS 5/12-1006
		100% of fair market value, up to any applicable statutory limit	
\$100.00		\$100.00	735 ILCS 5/12-1006
		100% of fair market value, up to any applicable statutory limit	
	portion you own Copy the value from Schedule A/B \$5.00	standard sta	\$5.00 \$5.00 \$5.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit

	Ca	ase 18-01276	Doc 1	Filed 01/16/18 Document	Entere Page 18	ed 01/16/18 20:3 3 of 70	85:30 Desc N	⁄lain
Fill i	n this infor	mation to identify you	ır case:					
Debt	tor 1	Crystal R Roger		ddle Name	Last Name			
Debt (Spou	tor 2 se if, filing)	First Name	Mic	ddle Name	Last Name			
Unite	ed States Ba	nkruptcy Court for the:	NORTH	HERN DISTRICT OF ILL	INOIS			
Case (if kno	e number _ wn)							if this is an ded filing
	cial Forr nedule		: Who I	Have Claims S	Secure	d by Property	<i>(</i>	12/15
s nee		e Additional Page, fill it o		ed people are filing togethe the entries, and attach it t				
1. Do	any creditors	have claims secured by	y your prope	rty?				
[☐ No. Checl	k this box and submit t	his form to t	he court with your other	schedules. Y	ou have nothing else to	report on this form.	
ı	Yes. Fill in	all of the information	below.					
Part	1: List A	II Secured Claims				0.1	0.1	0.1
for ea	ach claim. If m	nore than one creditor has	a particular o	e secured claim, list the crec claim, list the other creditors ording to the creditor's name	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Santande USA	er Consumer	Describe th	he property that secures the	he claim:	\$20,374.00	\$7,575.00	\$12,799.00
	Creditor's Nam	е	2011 Ch	evrolet Malibu 105k	miles			
	Po Box 9 Ft Worth,	61245 TX 76161	As of the dapply.	late you file, the claim is:	Check all that			
	Number, Street	t, City, State & Zip Code	Unliquid	dated				
Who	owes the de	ebt? Check one.	☐ Dispute Nature of	d lien. Check all that apply.				
■ D	■ Debtor 1 only □ An agreement you made (such as mortgage or secured							

Debtor 1 only Debtor 2 only

car loan)

12/12 Last

Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Check if this claim relates to a

community debt Opened

Active Date debt was incurred 12/20/12

Last 4 digits of account number

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

1000

Add the dollar value of your entries in Column A on this page. Write that number here: \$20,374.00 If this is the last page of your form, add the dollar value totals from all pages. \$20,374.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Page 19 of 70 Document Fill in this information to identify your case: Debtor 1 **Crystal R Rogers** Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ■ No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount 2.1 Illinois Department of Revenue Last 4 digits of account number 5889 \$1,000.00 \$1,000.00 \$0.00 Priority Creditor's Name **BK Unit Level 7-425** When was the debt incurred? 100 Randolph St Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government

☐ Claims for death or personal injury while you were intoxicated

Taxes

Other. Specify

Is the claim subject to offset?

■ No

☐ Yes

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Debto	or 1 Crystal R Rogers		Case number (if know)						
2.2	Internal Revenue Service	Last 4 digits of account number 58	389 \$4,710.00	\$4,710.00	\$0.00				
	Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?		-					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply Contingent							
,	Who incurred the debt? Check one.								
	■ Debtor 1 only	☐ Unliquidated							
	Debtor 2 only	☐ Disputed							
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:							
	☐ At least one of the debtors and another	☐ Domestic support obligations							
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government							
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated							
	■ No	Other. Specify							
	☐ Yes	Taxes							
Part :	2: List All of Your NONPRIORITY Unsecu	ured Claims							
4. L i ui th	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2.	alphabetical order of the creditor who laim. For each claim listed, identify what t	holds each claim. If a credit ype of claim it is. Do not list cla	aims already included in	Part 1. If more ation Page of				
4.1	1stprogress/1stequity/	Last 4 digits of account number	4735		\$226.00				
4.1	Nonpriority Creditor's Name Po Box 84010 Columbus, GA 31908	When was the debt incurred?	Opened 04/15 Last /	Active	<u> </u>				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply							
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community	☐ Student loans							
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not							
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts							
				ıo					
	Yes	Other. Specify Credit Card							

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Document Page 21 of 70 Debtor 1 Crystal R Rogers Case number (if know) 4.2 **Advocate South Suburban** Last 4 digits of account number \$300.00 Nonpriority Creditor's Name PO BOx 4251 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify 4.3 \$2,429.00 American Infosource Last 4 digits of account number Nonpriority Creditor's Name T Mobile When was the debt incurred? PO BOx 248848 Oklahoma City, OK 73124 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.4 Americash Loan Last 4 digits of account number \$1,000.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 184 Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Unsecured

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Crystal R Rogers Case number (if know) 4.5 **Archerfield Funding** Last 4 digits of account number \$500.00 Nonpriority Creditor's Name 3601 PGA Blvd When was the debt incurred? Palm Beach Gardens, FL 33410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.6 \$195.00 **Argan Agency** Last 4 digits of account number Nonpriority Creditor's Name 8668 Spring Mountain Rd When was the debt incurred? Las Vegas, NV 89117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other. Specify 4.7 **Atlas Acquisitions** Last 4 digits of account number \$1,000.00 Nonpriority Creditor's Name 294 Union St. When was the debt incurred? Hackensack, NJ 07601 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes

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Debtor 1 Crystal R Rogers Case number (if know) 4.8 Bank of America Last 4 digits of account number \$431.00 Nonpriority Creditor's Name 100 North Tryon Street When was the debt incurred? Charlotte, NC 28255 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.9 **Capital Accounts** Last 4 digits of account number \$62.00 Nonpriority Creditor's Name PO BOx 140065 When was the debt incurred? Nashville, TN 37214 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other. Specify 4.1 **Capital One** \$100.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box71083 When was the debt incurred? Charlotte, NC 28272 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes

Document Page 24 of 70 Debtor 1 Crystal R Rogers Case number (if know) 4.1 Cash Net USA \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 200 West Jackson When was the debt incurred? Chicago, IL 60606 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.1 **Charles Amenta** \$60.00 Last 4 digits of account number Nonpriority Creditor's Name 18161 Morris Ave When was the debt incurred? Homewood, IL 60430 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other Specify Medical ☐ Yes 4.1 Chase Receivables \$218.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 1247 Broadway When was the debt incurred? Sonoma, CA 95476 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No ☐ Yes ☐ Student loans

report as priority claims

■ Other. Specify Unsecured

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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Debtor 1 Crystal R Rogers Case number (if know) 4.1 Chicagoland Foot & Ankle \$285.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 3153 W 111th Street When was the debt incurred? Chicago, IL 60655 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.1 Citibank \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 701 E 60th North When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Unsecured 4.1 City of Chicago - Tickets \$3.985.00 Last 4 digits of account number 6 Nonpriority Creditor's Name **Department of Revenue** When was the debt incurred? PO Box 88292 Chicago, IL 60680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Unsecured

Document Page 26 of 70 Debtor 1 Crystal R Rogers Case number (if know) 4.1 Collection Bureau of Hudson Valley \$654.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 831 When was the debt incurred? Newburgh, NY 12551 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unseucred ☐ Yes 4.1 **Community Care Network** \$60.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 88010 When was the debt incurred? Chicago, IL 60680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Med 4.1 Cook County Health and Hospitals \$243.00 9 Last 4 digits of account number Nonpriority Creditor's Name PO Box 70121 When was the debt incurred? Chicago, IL 60673-0121 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Med Other. Specify

Document Page 27 of 70 Debtor 1 Crystal R Rogers Case number (if know) 4.2 **Dental Works** \$100.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 643005 When was the debt incurred? Cincinnati, OH 45264 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.2 Dept Of Ed/582/nelnet 9792 \$44,757.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims/Bankruptcy Opened 07/14 Last Active Po Box 82505 When was the debt incurred? 12/31/17 Lincoln, NE 68501 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.2 9892 Dept Of Ed/582/neInet \$19,267.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/14 Last Active Attn: Claims/Bankruptcy Po Box 82505 When was the debt incurred? 12/31/17 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

Educational

Is the claim subject to offset?

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Debtor 1 Crystal R Rogers Case number (if know) 4.2 **First Premier Bank** 9820 \$570.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 05/15 Last Active Po Box 5524 When was the debt incurred? 10/16/15 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 First Premier Bank 9894 \$530.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 01/14 Last Active Po Box 5524 When was the debt incurred? 10/16/15 Sioux Falls, SD 57117 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other, Specify 4.2 **First Progress** \$100.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOx 9053 When was the debt incurred? Johnson City, TN 37615 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify

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Debtor 1 Crystal R Rogers Case number (if know) 4.2 **Geico Casualty** \$88.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 725 Canton St. When was the debt incurred? Norwood, MA 02062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes 4.2 7823 **Great American Finance** \$3,209.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 05/14 Last Active 20 N Wacker Dr. Suite 2275 When was the debt incurred? 4/27/15 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Household Goods ☐ Yes 4.2 Healthlab \$45.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 4090 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes

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Page 30 of 70 Debtor 1 Crystal R Rogers Case number (if know) 4.2 JP Morgan Chase \$100.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 370 Cleveland Ave When was the debt incurred? Westerville, OH 43081 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.3 K Jordan \$220.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 800849 When was the debt incurred? Dallas, TX 75380 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Unsecured 4.3 **Luther Appliance & Fur** 6808 \$3,454,00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/15 Last Active 129 Oser Ave Ste A When was the debt incurred? 12/22/17 Hauppauge, NY 11788 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Charge Account

Document Page 31 of 70 Debtor 1 Crystal R Rogers Case number (if know) 4.3 Medical Business Bureau \$100.00 Last 4 digits of account number 2 Nonpriority Creditor's Name PO Box 1219 When was the debt incurred? Park Ridge, IL 60068 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.3 **Midwest Orthopedics** \$40.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 1 Westbrook Corporate Center, 240 When was the debt incurred? Westchester, IL 60154 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Med 4.3 Miramed Revenue Group \$294.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: bankrutpcy When was the debt incurred? PO Box 77000 Detroit, MI 48277 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Official Form 106 E/F

debt

■ No ☐ Yes ☐ Student loans

Other. Specify

report as priority claims

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Med

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 32 of 70 Debtor 1 Crystal R Rogers Case number (if know) 4.3 **Montgomery Ward** \$650.00 Last 4 digits of account number 5 Nonpriority Creditor's Name PO Box 800849 When was the debt incurred? **Dallas, TX 75380** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.3 NCC \$125.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 815 Commerce Dr, Suite 270 When was the debt incurred? Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes 4.3 7 Northwest Specialists for Women \$40.00 Last 4 digits of account number Nonpriority Creditor's Name 900 N Kingsbury St, suite 130N When was the debt incurred? Chicago, IL 60610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No ☐ Yes

Is the claim subject to offset?

report as priority claims

Other. Specify

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Med

Document Page 33 of 70 Debtor 1 Crystal R Rogers Case number (if know) 4.3 **Northwestern Medicine** \$500.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 28155 Network Place When was the debt incurred? Chicago, IL 60673 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Med ☐ Yes 4.3 **Porania** \$500.00 Last 4 digits of account number 9 Nonpriority Creditor's Name PO Box 12213 When was the debt incurred? Scottsdale, AZ 85267 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Unsecured 4.4 **Progressive Insurance** 6435 \$2.835.00 Last 4 digits of account number 0 Nonpriority Creditor's Name c/o Credit Collection Services When was the debt incurred? 725 Canton St North Scituate, MA 02060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes

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Debtor 1 Crystal R Rogers Case number (if know) **RMCB** \$65.00 Last 4 digits of account number Nonpriority Creditor's Name **PO Box 1235** When was the debt incurred? Elmsford, NY 10523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.4 **Rush University Internists** \$25.00 Last 4 digits of account number Nonpriority Creditor's Name 75 Remittance Dr, Dept 1611 When was the debt incurred? Chicago, IL 60675 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Med 4.4 **Rush University Medical Center** \$100.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 4075 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Med Other. Specify

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Document Page 35 of 70 Debtor 1 Crystal R Rogers Case number (if know) 4.4 **Smith Centers for Foot** \$443.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 2930 S Michigan When was the debt incurred? Chicago, IL 60616 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.4 **Southwest Medical Affiliates** \$60.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 15618, Dept 938 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Med 4.4 Spark Energy Gas \$100.00 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 4328 MSC 350 When was the debt incurred? Houston, TX 77210 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

■ Other. Specify Unsecured

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Crystal R Rogers Case number (if know) Sprint \$100.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 4191 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unseucred ☐ Yes 4.4 Steven Pearl DDS \$55.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 2727 W Touhy Ave When was the debt incurred? Chicago, IL 60645-1000 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Med 4.4 Tempoe \$100.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 1750 Elm, Suite 1200 When was the debt incurred? Manchester, NH 03104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Unseucred

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\$100.00 \$55.00
\$55.00
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\$55.00
\$55.00
\$100.00

Part 3: List Others to Be Notified About a Debt That You Already Listed

☐ Yes

■ Other. Specify Med

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Crystal R Rogers		Case number (if know)				
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?				
D&A Services	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
1400 E. Touhy Ave, G2 Des Plaines, IL 60018		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Des Flames, IL 00010	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 c	, •				
Harris & Harris	Line 4.16 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
111 W Jackson, Suite 400 Chicago, IL 60604		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
ITx Healthcare, LLC	Line 4.38 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 360 Findlay, OH 45839		■ Part 2: Creditors with Nonpriority Unsecured Claims				
· manay, o recoo	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 c	did you list the original creditor?				
Mauer Law	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
123 W Madison 1500 Chicago, IL 60602		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Omougo, 12 00002	Last 4 digits of account number	4559				
Name and Address	On which entry in Part 1 or Part 2 or					
Penn Credit Corp	Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 988 Harrisburg, PA 17108		■ Part 2: Creditors with Nonpriority Unsecured Claims				
namodaly, i A i i i i i i	Last 4 digits of account number					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	5,710.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	5,710.00
					Total Claim
	6f.	Student loans	6f.	\$	64,024.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	27,551.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	91,575.00

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Document Fill in this information to identify your case: Debtor 1 **Crystal R Rogers** Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2	City		Sidle	ZIF Code	
	Name				_
	Number	Street			_
	0.1			710.0	_
2.3	City		State	ZIP Code	
2.5	Name				_
	Name				
	Number	Street			_
	Number	Sileet			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	City		State	ZIF Code	
	Name				_
	Number	Street			
					_
	City		State	ZIP Code	

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		Docume	ent Page 40 d	of 70	
Fill in this	information to identify your c	ase:			
Debtor 1	Crystal R Rogers				
20010	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	ner				
(if known)				☐ Check if this is an	
				amended filing	
Official	l Form 106H				
Sched	ule H: Your Code	ebtors		12/1	5
501104	<u> </u>	, D. C. C.		12/1	<u> </u>
	and case number (if known). you have any codebtors? (If y			e as a codebtor.	
,	,		ор		
■ No					
☐ Yes					
Arizona 	a, California, Idaho, Louisiana, I			ry? (Community property states and territories include ington, and Wisconsin.)	
	Go to line 3. Did your spouse, former spouse.	se, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only if	that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person she sure you have listed the creditor on Schedule D (Off 06G). Use Schedule D, Schedule E/F, or Schedule G t	icial
	Column 1: Your codebtor Name, Number, Street, City, State and ZIP	Code		Column 2: The creditor to whom you owe the de Check all schedules that apply:	bt
	tamo, rambor, otrock, orty, otato and En	0000		Check all schedules that apply.	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
_	Number Street			_	
	City	State	ZIP Code		
				—	
3.2	Name			Schedule D, line	
ľ	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			-	
(City	State	ZIP Code		

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Fill	in this information to identify your	case:							
	otor 1 Crystal R F								
	otor 2				_				
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILLINOIS		_				
	se number own)		-				ed filing ent showing		chapter
Of	fficial Form 106I						as of the follo	owing date:	
	chedule I: Your Inc	come				MM / DD/ Y	YYY		12/15
sup _l spo	s complete and accurate as positive polying correct information. If you use. If you are separated and you have a separate sheet to this form Describe Employment	u are married and not filit our spouse is not filing wi . On the top of any additi	ng jointly, and your s ith you, do not includ	pouse is e inform	living wit ation abo	h you, incl ut your spo	ude informa ouse. If more	ition about e space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filir	ng spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			☐ Employed			
		_mproyment etatae	☐ Not employed			☐ Not employed			
	employers.	Occupation	Unit Clerk						
	Include part-time, seasonal, or self-employed work.	Employer's name	Rush University Center	Medica	l 				
	Occupation may include student or homemaker, if it applies.	Employer's address	1700 W. Van Bur Chicago, IL 6061		om 150				
		How long employed t	here? 10 years	i					
Par	t 2: Give Details About Mo	onthly Income							
spou If yo	mate monthly income as of the use unless you are separated. u or your non-filing spouse have no space, attach a separate sheet to	nore than one employer, co							
	, opaso, allasi, a coparato citott				For D	ebtor 1	For Debt		
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	4,983.33	\$	N/A	
3.	Estimate and list monthly over	rtime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$\$	983.33	\$	N/A	

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Deb	tor 1	Crystal R Rogers			Case	e number (<i>if known</i>)	_				
					Fo	r Debtor 1			ebtor :		
	Сор	y line 4 here	4.		\$_	4,983.33	_	\$		N/A	_
5.	List	all payroll deductions:									
	5a. 5b. 5c.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5a 5b 5c	o. o.	\$_ \$_ \$_	650.00 0.00 156.00	-	\$ \$		N/A N/A N/A	- - <u>-</u>
	5d. 5e. 5f. 5g.	Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	50 56 5f 5g	∋. :	\$_ \$_ \$_	0.00 277.33 0.00 117.00	-	\$ \$ \$		N/A N/A N/A	- <u>-</u>
	5h.	Other deductions. Specify: Parking		ց. Դ.+	\$_	151.67		· —		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,352.00	_	\$		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,631.33	_	\$		N/A	<u>-</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends	8a 8b		\$_ \$	0.00 0.00	_	\$		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$_ \$	0.00	-	\$		N/A	_
	8d.	Unemployment compensation	80		\$_	0.00	_	\$		N/A	_
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8€ _ 8f	:	\$_ \$_	0.00	_	\$		N/A	_
	8g.	Pension or retirement income Other monthly income. Specify:	86	g. า.+	\$_ \$	0.00	_	\$		N/A N/A	_
9.	8h. Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	Г	- \$	0.00	-] -	\$ \$		N/A	_
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		3,631.33 +	;		N/A	= \$	3,631.33
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe						hedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain ies							12.	\$	3,631.33
13.	Do y	you expect an increase or decrease within the year after you file this form? No.	,							Combi month	ned ly income

Fill	in this informat	tion to identify ye	our case:					
Deb	tor 1	Crystal R Ro	gers				ck if this is: An amended filing A supplement show	ving postpetition chapter
(Spc	ouse, if filing)						13 expenses as of	the following date:
Unite	ed States Bankru	uptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY	
	e number nown)							
	fficial Fo							
		J: Your			- Clin - to - dh - n h	- 41		12/15
info	rmation. If me		eded, atta	. If two married people ar ich another sheet to this n.				
Part	t 1: Descri	ibe Your House t case?	ehold					
	■ No. Go to	line 2.	in a separ	ate household?				
	□ No □ Ye		st file Offic	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.	
2.	Do you have	dependents?	□ No					
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents r				Daughter		14	□ No ■ Yes
								□ No □ Yes
								□ No
							_	☐ Yes ☐ No
•	D							☐ Yes
3.	expenses of	enses include people other t your depende	han $_{\square}$	No Yes				
Esti	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
4.		r home owners d any rent for th		nses for your residence. I or lot.	nclude first mortgage	e 4. \$) 	1,000.00
	If not include	ed in line 4:						
	4a. Real e	state taxes				4a. \$		0.00
	•	ty, homeowner'				4b. \$		0.00
		maintenance, re owner's associa		upkeep expenses dominium dues		4c. \$ 4d. \$		100.00 0.00
5				our residence, such as ho	me equity loans	5. \$		0.00

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Debtor	1 Crystal R Rogers	Case number (if known)	
6. U	tilities:		
-	a. Electricity, heat, natural gas	6a. \$	350.00
61	b. Water, sewer, garbage collection	6b. \$	60.00
6	c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	250.00
6	d. Other. Specify:	6d. \$	0.00
7. F	ood and housekeeping supplies	7. \$	663.00
	hildcare and children's education costs	8. \$	50.00
	lothing, laundry, and dry cleaning	9. \$	100.00
	ersonal care products and services	10. \$	90.00
	ledical and dental expenses	11. \$	60.00
	ransportation. Include gas, maintenance, bus or train fare.	· · · · · · · · · · · · · · · · · · ·	00.00
	o not include car payments.	12. \$	240.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	haritable contributions and religious donations	14. \$	0.00
	surance.	· 	
	o not include insurance deducted from your pay or included in lines 4 or 20.		
1	5a. Life insurance	15a. \$	0.00
1	5b. Health insurance	15b. \$	0.00
1	5c. Vehicle insurance	15c. \$	118.00
1	5d. Other insurance. Specify:	15d. \$	0.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	pecify:	16. \$	0.00
7. I n	stallment or lease payments:		
1	7a. Car payments for Vehicle 1	17a. \$	0.00
1	7b. Car payments for Vehicle 2	17b. \$	0.00
1	7c. Other. Specify:	17c. \$	0.00
1	7d. Other. Specify:	17d. \$	0.00
8. Y	our payments of alimony, maintenance, and support that you did not repor	t as	
	educted from your pay on line 5, Schedule I, Your Income (Official Form 10	6I).	0.00
9. O	ther payments you make to support others who do not live with you.	\$	0.00
	pecify:	19.	
	ther real property expenses not included in lines 4 or 5 of this form or on 5		
20	0a. Mortgages on other property	20a. \$	0.00
20	0b. Real estate taxes	20b. \$	0.00
20	0c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20	0d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20	De. Homeowner's association or condominium dues	20e. \$	0.00
21. O	ther: Specify:	21. +\$	0.00
)	algulate your monthly expenses		
	alculate your monthly expenses	6	2 004 00
	2a. Add lines 4 through 21.	\$ -2	3,081.00
	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	D	
22	2c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,081.00
23. C	alculate your monthly net income.	L	
	3a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,631.33
	3b. Copy your monthly expenses from line 22c above.	23b\$	3,081.00
۷-	55. Supply State Montain, expenses from and 220 above.	Σος. Ψ	3,001.00
2:	3c. Subtract your monthly expenses from your monthly income.		
	The result is your <i>monthly net income</i> .	23c. \$	550.33
	· · / · · · · · · · · · · · · · · · · · · ·	-	
	o you expect an increase or decrease in your expenses within the year after		
	or example, do you expect to finish paying for your car loan within the year or do you expect	your mortgage payment to increase	se or decrease because of a
_	odification to the terms of your mortgage?		
	No.		
	Yes. Explain here:		

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Fill in th	nis information to identify you	r case:			
Debtor 1					
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if,		Middle Name	Last Name		
United S	States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
Case nu	ımher				
(if known)					☐ Check if this is an amended filing
Officia	al Form 106Dec				
Dec	laration About	an Individua	al Debtor's So	chedules	12/15
	g money or property by fraud r both. 18 U.S.C. §§ 152, 1341, Sign Below		marapisy subsection result	mes up to \$250,000,	or impresentation up to 20
Dic	d you pay or agree to pay som	neone who is NOT an att	orney to help you fill out	bankruptcy forms?	
•	No				
	Yes. Name of person				ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
	der penalty of perjury, I declar t they are true and correct.	e that I have read the su	mmary and schedules file	ed with this declaration	and
Х	/s/ Crystal R Rogers		Х		
	Crystal R Rogers Signature of Debtor 1		Signature of	f Debtor 2	
	Date January 16, 2018		Date		

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Fill i	n this inforn	nation to identify you	r case:			
Debt	or 1	Crystal R Rogers	S			
		First Name	Middle Name	Last Name		
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
Linite	ad States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILL INOIS		
Office	o States Dai	ikidpicy Codit for the.	- NORTHERN DIOTRIOT	or illinoid		
Case (if know	e number wn)				_	check if this is an mended filing
	icial Fo		Affairs for Individ	duals Filing for B	ankruptcy	4/16
nforr numb	mation. If m per (if knowr	ore space is needed, n). Answer every ques	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup additional pages, write you	
Part			rital Status and Where You	Lived Before		
1. \	What is your	current marital statu	IS?			
[☐ Married■ Not mar	ried				
2. [During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
]]	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
] [■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
F	Fill in the tota	I amount of income yo	u received from all jobs and a	g a business during this yeall businesses, including parter together, list it only once un		ndar years?
[□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,851.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Page 47 of 70 Case number (if known) Debtor 1 Crystal R Rogers

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler inuary 1 to	ndar year: December (31, 2017)	■ Wages, commissions, bonuses, tips	\$62,395.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	ousiness	
		dar year bef December 3		■ Wages, commissions, bonuses, tips	\$56,475.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	ousiness	
	and other winnings. List each s	public benef If you are fili	it payments; ng a joint cas ne gross inco	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat	est; dividends; money colle ou received together, list it	ected from lawsuits; only once under De	royalties; and obtor 1.	d gambling and lottery
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inconstraints Describe below.		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
6.	□ No.	Neither De individual puring the No. Yes * Subject to Debtor 1 or	position 1 nor Expression 1 nor Expression 2 nor Expressi	each creditor to whom you pai editor. Do not include paymen payments to an attorney for the on 4/01/19 and every 3 years r both have primarily consu- re you filed for bankruptcy, di each creditor to whom you pai ments for domestic support of	d you pay any creditor a to d a total of \$6,425* or more ts for domestic support oblais bankruptcy case. a after that for cases filed of mer debts. d you pay any creditor a to	tal of \$6,425* or more pay igations, such as chur or after the date of tal of \$600 or more?	re? ments and the support a fadjustment good paid that	he total amount you and alimony. Also, do
			attorney for	this bankruptcy case.				
	Creditor	's Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for

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Case number (if known) Document Debtor 1 Crystal R Rogers

7.	Within 1 year before you filed for bankruptor Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No	rtners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures				
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title					t or custody
	Case number					
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garnis	hed, attached	d, seized, or levied? Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankruptocourt-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess			efit of creditors, a
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value	of more than \$60	0 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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Deb	otor 1 Crystal R Rogers			C	ase number (i	f known)	
	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or			or contributions	s with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	Describe what you	contributed		Dates you contributed	Value
Part	t 6: List Certain Losses						
	Within 1 year before you filed for bankr or gambling?	uptcy or	since you filed for b	ankruptcy, did yo	ou lose anyth	ing because of the	t, fire, other disaste
	■ No						
	☐ Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Include	be any insurance co the amount that insur- nce claims on line 33 c	ance has paid. Li	st pending	Date of your loss	Value of property los
Part	t 7: List Certain Payments or Transfe	rs					
16	·		d v.c., er envene elec		hahalf nav av	tuanafar any mana	why to anyone you
	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	preparir	ng a bankruptcy peti	tion?			rty to anyone you
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and va transferred	lue of any prope	erty	Date payment or transfer was made	Amount o
	Thurston Law Firm 208 S. LaSalle Suite 1410 Chicago, IL 60604 cthurston@thurstonlawfirm.com	. • •	Attorney Fees			1/16/18	\$340.00
	Within 1 year before you filed for bankr promised to help you deal with your cre Do not include any payment or transfer that	editors o	r to make payments			transfer any prope	rty to anyone who
	■ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address		Description and va transferred	lue of any prope	erty	Date payment or transfer was made	Amount o
	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a second or transfer that you have a second or transfers that you have a second or transfer that you h	our busin rs made a	ess or financial affai as security (such as th	rs?			
	Yes. Fill in the details.						
	Person Who Received Transfer Address		Description and va property transferre			ny property or received or debts hange	Date transfer was made

Person's relationship to you

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Case number (if known)

Debtor 1 Crystal R Rogers

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.				
	Name of trust	Description and v	value of the proper	ty transferred	Date Transfer was made
Par	Es: List of Certain Financial Accounts, I	nstruments, Safe Deposi	t Boxes, and Stora	ge Units	
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, ass No Yes. Fill in the details.	, or other financial accou	nts; certificates of	•	, ,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	l year before you filed for	r bankruptcy, any s	safe deposit box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit ■ No □ Yes. Fill in the details.	t or place other than your	r home within 1 yea	ar before you filed for bankrupt	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control	ol for Someone Else			
23.	Do you hold or control any property that s for someone. No Yes. Fill in the details.	omeone else owns? Incl	ude any property y	ou borrowed from, are storing	for, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the property	Value
Par	10: Give Details About Environmental In	nformation			
For	he purpose of Part 10, the following defini	tions apply:			

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Crystal R Rogers

24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ntal law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Code Covernmental unit Address (Number, Street, City, State and ZIP Code) Code Covernmental unit Code Covernmental unit Address (Number, Street, City, State and ZIP Code) Code Covernmental unit Code Code Covernmental unit Code Code Code Code Code Code Code Code							
26.	Have you been a party in any judicial or adminis	trative proceeding under any envir	onmental law? Include settlements a	nd orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	t 11: Give Details About Your Business or Conr	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have any	y of the following connections to any	business?				
	☐ A sole proprietor or self-employed in a tr	ade, profession, or other activity,	either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executi	ve of a corporation						
	☐ An owner of at least 5% of the voting or	equity securities of a corporation						
	■ No. None of the above applies. Go to Part 1	2.						
	☐ Yes. Check all that apply above and fill in th	e details below for each business.						
		scribe the nature of the business	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code)	ne of accountant or bookkeeper	Do not include Social Security n	iumber or IIIN.				
28.	Within 2 years before you filed for bankruptcy, d institutions, creditors, or other parties.	id you give a financial statement to	Dates business existed anyone about your business? Inclu	de all financial				
	_							
	No							
	Yes. Fill in the details below. Name Dat	e Issued						
	Address (Number, Street, City, State and ZIP Code)							

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Page 52 of 70 Case number (if known) Debtor 1 Crystal R Rogers Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Crystal R Rogers Crystal R Rogers Signature of Debtor 2 Signature of Debtor 1 Date **Date January 16, 2018** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to Thurston Law Firm as part of the advance payment retainer shall immediately become property of Thurston Law Firm in exchange for a commitment to provide the legal services described above. Said funds will be deposited into the main bank account owned by Thurston Law Firm and will be used for the general expenses of the firm. Client understands that the benefit he or she is receiving is the commitment of Thurston Law Firm to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for	
epresenting the debtor on all matters arising in the case unless at least the case unless the case u	
For all of the services outlined above, the attorney will be paid a flat fee of \$ 4000.00	t.
and a flat fee of \$ 4000.00	

2.	In addition,	the debtor wi	ll pay the	filing fee in the	case and other expenses of
	\$ 363.00		10000	8 m	ease and other expenses of

3.	Before signing this agreement, the attorney received \$ 340.00	
	toward the flat fee, leaving a balance due of \$ 3660.00 ; and \$ 363.00	for expenses
	leaving a balance due of \$ 4023.00	

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 01/16/2018

Signed:

/s/ Christine Thurston

Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	re Crystal R Rogers		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	RNEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services rende	ered or to
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received		\$	340.00	
	Balance Due		s	3,660.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	bers and associates of m	y law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the nar				firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspect	s of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. Representation of the debtor in adversary proceeding e. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on how 	ement of affairs and plan which ors and confirmation hearing, ar as and other contested bankrupto reduce to market value; exe ons as needed; preparation	may be required; and any adjourned hea by matters; emption planning	urings thereof;	ng of
5.	By agreement with the debtor(s), the above-disclosed fee	e does not include the following	service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.		payment to me for i	representation of the debt	or(s) in
	January 16, 2018	/s/ Christine Thur	ston		
	Date	Christine Thurston Signature of Attorne			
		Thurston Law Fir			
		208 S. LaSalle Suite 1410			
		Chicago, IL 60604			
		312-818-8008 Fa cthurston@thurs			
		ourar storr wurden			

Name of law firm

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United States Bankruptcy CourtNorthern District of Illinois

In re	Crystal R Rogers		Case No.	
		Debtor(s)	Chapter 1:	3
	VE	ERIFICATION OF CREDITOR M	MATRIX	
		Number of	f Creditors:	60
	The above-named Debtor(s (our) knowledge.) hereby verifies that the list of credi	itors is true and con	rrect to the best of my
		/s/ Crystal R Rogers		

1stprogress/1stequity/ Po Box 84010 Columbus, GA 31908

Advocate South Suburban PO BOx 4251 Carol Stream, IL 60197

American Infosource T Mobile PO BOx 248848 Oklahoma City, OK 73124

Americash Loan PO Box 184 Des Plaines, IL 60016

Archerfield Funding 3601 PGA Blvd Palm Beach Gardens, FL 33410

Argan Agency 8668 Spring Mountain Rd Las Vegas, NV 89117

Atlas Acquisitions 294 Union St. Hackensack, NJ 07601

Bank of America 100 North Tryon Street Charlotte, NC 28255

Capital Accounts PO BOx 140065 Nashville, TN 37214

Capital One PO Box71083 Charlotte, NC 28272

Cash Net USA 200 West Jackson Chicago, IL 60606 Charles Amenta 18161 Morris Ave Homewood, IL 60430

Chase Receivables 1247 Broadway Sonoma, CA 95476

Chicagoland Foot & Ankle 3153 W 111th Street Chicago, IL 60655

Citibank 701 E 60th North Sioux Falls, SD 57117

City of Chicago - Tickets Department of Revenue PO Box 88292 Chicago, IL 60680

Collection Bureau of Hudson Valley PO Box 831 Newburgh, NY 12551

Community Care Network PO Box 88010 Chicago, IL 60680

Cook County Health and Hospitals PO Box 70121 Chicago, IL 60673-0121

D&A Services 1400 E. Touhy Ave, G2 Des Plaines, IL 60018

Dental Works PO Box 643005 Cincinnati, OH 45264

Dept Of Ed/582/nelnet Attn: Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501 Dept Of Ed/582/nelnet Attn: Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501

First Premier Bank Po Box 5524 Sioux Falls, SD 57117

First Premier Bank Po Box 5524 Sioux Falls, SD 57117

First Progress PO BOx 9053 Johnson City, TN 37615

Geico Casualty 725 Canton St. Norwood, MA 02062

Great American Finance Attn: Bankruptcy 20 N Wacker Dr. Suite 2275 Chicago, IL 60606

Harris & Harris 111 W Jackson, Suite 400 Chicago, IL 60604

Healthlab PO Box 4090 Carol Stream, IL 60197

Illinois Department of Revenue BK Unit Level 7-425 100 Randolph St Chicago, IL 60601

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 ITx Healthcare, LLC PO Box 360 Findlay, OH 45839

JP Morgan Chase 370 Cleveland Ave Westerville, OH 43081

K Jordan PO Box 800849 Dallas, TX 75380

Luther Appliance & Fur 129 Oser Ave Ste A Hauppauge, NY 11788

Mauer Law 123 W Madison 1500 Chicago, IL 60602

Medical Business Bureau PO Box 1219 Park Ridge, IL 60068

Midwest Orthopedics 1 Westbrook Corporate Center, 240 Westchester, IL 60154

Miramed Revenue Group Attn: bankrutpcy PO Box 77000 Detroit, MI 48277

Montgomery Ward PO Box 800849 Dallas, TX 75380

NCC 815 Commerce Dr, Suite 270 Oak Brook, IL 60523

Northwest Specialists for Women 900 N Kingsbury St, suite 130N Chicago, IL 60610

Northwestern Medicine 28155 Network Place Chicago, IL 60673

Penn Credit Corp PO Box 988 Harrisburg, PA 17108

Porania PO Box 12213 Scottsdale, AZ 85267

Progressive Insurance c/o Credit Collection Services 725 Canton St North Scituate, MA 02060

RMCB PO Box 1235 Elmsford, NY 10523

Rush University Internists 75 Remittance Dr, Dept 1611 Chicago, IL 60675

Rush University Medical Center PO Box 4075 Carol Stream, IL 60197

Santander Consumer USA Po Box 961245 Ft Worth, TX 76161

Smith Centers for Foot 2930 S Michigan Chicago, IL 60616

Southwest Medical Affiliates PO Box 15618, Dept 938 Wilmington, DE 19850

Spark Energy Gas PO Box 4328 MSC 350 Houston, TX 77210 Sprint PO Box 4191 Carol Stream, IL 60197

Steven Pearl DDS 2727 W Touhy Ave Chicago, IL 60645-1000

Tempoe 1750 Elm, Suite 1200 Manchester, NH 03104

Tmobile Financial 460 Chicago Ridge Mall Chicago Ridge, IL 60415

U of IL Community Credit Union 2201 South First St Collection Champaign, IL 61820

University of IL Medical Center PO Box 12199 Chicago, IL 60612